The Greenwashing of the Modern Wellness World

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Human beings have long struggled to interpret the meaning of their suffering. Illness interrupts the normal rhythm of life, disturbs familiar routines, and awakens ancient instincts of fear and self-protection. Across cultures and historical periods, societies have built elaborate systems to explain these disruptions and to provide relief. Yet in the contemporary world, beneath the sheen of technological sophistication and a booming wellness economy, a subtle but profound dependency is still cultivated within those who seek healing.

A significant portion of modern wellness operates through a type of philosophical "greenwashing." This is not the greenwashing of plant imagery or natural marketing aesthetics. It is the greenwashing of concepts. Interventions are framed as "holistic," "natural," or "root-cause oriented," even when their mechanisms, origins, and effects reflect the same reductionist logic as pharmaceuticals. Substances such as vitamin D3, ivermectin, methylene blue, liposomal iron and similar compounds are often marketed as if they represent a return to traditional healing. Yet their methods of manufacture, their chemical profiles, and their effects on the body contrast sharply with the terrain-centered, constitutional models of classical medicine.

This contrast becomes clearer when set beside the conceptual foundations of *Ṭibb at-Taqlīdī* (traditional medicine). Its understanding of constitution (*Mizāj*), vital force (*Quwá*), and the interplay of elemental principles (*Arkān*) creates a radically different picture of health. Within this paradigm, interventions should harmonize with the four primary fluids (*Akhlāṭ*), support the body's innate wisdom, and assist its intrinsic drive toward equilibrium. Synthetic or isolated substances that disregard these principles cannot be described as natural in any traditional sense. The contemporary branding that surrounds them is thus a kind of

philosophical varnish. It is not nature. It is the appearance of nature.

To understand how this phenomenon shapes modern individuals, we must examine the deeper psychological patterns activated during illness. Sickness introduces vulnerability. Symptoms (*Aʿrāḍ*) disrupt predictability. The mind gravitates toward fear, and fear gravitates toward dependency. This is the perfect environment for the emergence of what psychologists call the *victim consciousness*.

When a person becomes sick, several factors come together. There is a fear of bodily sensations. There is a loss of control. There is the belief that one cannot understand or manage the condition alone. These create the three classical roles of what is known as the *victim triangle*. **The individual becomes the victim. The symptoms become the villain. The clinician becomes the rescuer.**

Conventional medicine has long operated through this structure. The patient is told that the body is unpredictable, that disease arises suddenly, and that specialized authority is required to interpret what is wrong. Functional medicine and holistic coaching often appear to offer an escape from this model. Yet in reality, they replicate it through different rhetoric and different tools.

Their vocabulary is enriched with terms like “root cause,” “systems,” “holistic,” and “functional.” Their imagery is filled with leaves, mandalas, botanical illustrations, and natural palettes. Yet underlying many of these systems is the same adversarial relationship to the body. The body is still seen as malfunctioning. The individual is still seen as deficient. The practitioner still becomes the gatekeeper to tests, supplements, protocols, and interpretations.

I observed firsthand how clinicians, often with sincere intentions, become the exclusive interpreters of vast and expensive diagnostic data. Elaborate panels detect micronutrient variations, hormonal fluctuations, or microbiome shifts, all interpreted as malfunctions

requiring correction. The "root cause approach" becomes a tangle of data rather than a journey toward understanding the self. Supplements become transitional objects, testing becomes ritual, and the patient becomes dependent.

This is how the chronic patient identity is formed. Not necessarily through more serious illness, but through deeper psychological entrenchment. The individual internalizes the belief that the body is a puzzle only an expert can solve. Health becomes a project of perpetual correction rather than a harmonious relationship with the body's intelligence.

When victory becomes impossible, the battle expands. Instead of stringing these ideas into several sentences, they can be more transparently presented:

- More complicated diagnostic methods emerge
- More intricate interpretive frameworks develop
- More expensive interventions are introduced
- More sophisticated "root-cause" narratives are invented
- More dependency is created
- More fear is cultivated

This creates a continual loop that is almost impossible to escape without a complete philosophical reorientation.

True holism requires a dramatically different premise. It requires the recognition that the body rarely makes mistakes. Symptoms are not evidence of failure. They are evidence of adaptation. They are messages, not malfunctions. They are a reflection of the body's intelligence, not its incompetence. Within *Ṭibb at-Taqlīdī* (traditional medicine), this is understood through the dynamics of temperament (*Mizāj*) and the behavior of the vital force (*Quwá*). The body's reactions are considered purposeful and intelligible.

Once this premise is accepted, the victim triangle dissolves.
If the body is not the villain, then there is no enemy. If there is no

enemy, then the rescuer loses his status. And when the rescuer is no longer necessary, sovereignty returns to the individual.

This transition is not merely intellectual, but developmental. Victim consciousness is a childlike psychological posture. It seeks reassurance, protection, and certainty. It externalizes responsibility. It looks for someone else to fix the problem. Maturation requires an initiation into personal responsibility. It requires the individual to understand that they possess agency, wisdom, and choice.

This does not mean rejecting expertise. It means transforming the relationship with expertise. A sovereign individual seeks guidance, not rescue. He seeks understanding, not salvation. He consults experts as partners, not as saviors. The relationship becomes collaborative rather than hierarchical.

This is the foundation of the coaching model I advocate. The purpose is not to liberate people from their symptoms alone. The purpose is to liberate them from the identity that keeps them sick. Symptoms often mirror old patterns of fear, avoidance, or unresolved narrative. Healing requires addressing both the physiology and the story.

Success is therefore not measured by compliance with protocols. It is measured by the dissolution of the old identity. It is measured by how the individual reframes the “what if” questions that dominate chronic illness.

✘ Instead of:

- What if this gets worse
- What if this never resolves
- What if something deeper is wrong

✓The narrative becomes:

• What if this discomfort is an invitation to a deeper vitality
• What if this symptom is guiding me toward a new life
• What if this experience is the catalyst for true transformation

This is not the romanticization of suffering. It is the recognition that the interpretation of suffering is a crucial part of healing. The body often communicates through discomfort when other signals have been ignored. Symptoms become signposts. They are not enemies to be conquered, but messages to be understood.

This approach reshapes the role of the consultant. A consultant cannot be the rescuer. He cannot foster dependency. He cannot build a business based on perpetual patienthood. He must guide individuals toward sovereignty. He must help them recognize patterns, challenge assumptions, and reconstruct narratives.

This model requires a different economic foundation. Instead of retaining clients indefinitely, the aim is to empower them to leave. Instead of encouraging reliance on protocols, the aim is to cultivate trust in the body. Instead of interpreting every sensation as a malfunction, the aim is to understand it as communication.

A society built on sovereignty rather than fear would transform the way illness is understood. It would shift the collective narrative away from fragility and toward resilience. It would decentralize authority. It would encourage agency. It would dismantle the psychological infrastructure that keeps people trapped in dependency.

Consider what the world would look like if people no longer believed that their bodies constantly make mistakes. Imagine a generation raised to trust their sensations. Imagine medical systems that encourage wisdom rather than obedience. Imagine a culture where healing is seen as a partnership between the

individual, their constitution (*Mizāj*), and the natural principles that govern the body.

This is not a utopian fantasy. **It is a logical consequence of rejecting the philosophical greenwashing that dominates modern wellness.** The natural world does not require supplementation or drugs in order to function. Neither does the human body require constant chemical correction.

To reclaim sovereignty is to recognize that wisdom is embedded within the very structure of the body. It is to see symptoms as information. It is to understand that healing arises from harmony, not control. It is to accept that the body strives for balance through the dynamics of the four *Akhlāṭ* (humours/fluids), the principles of *Mizāj* (*constitution/temperament*), and the maintenance of the vital force (Quwá).

Those who feel called to support others must adopt a coaching model that honors these truths. It is not the easiest path, because it requires releasing the rescuer identity. However, it is the path that transforms lives.

In summary, my vision resolves into the following principles:

• A world shaped by individuals who trust their own bodies rather than outsource their intuition.

• A society that interprets symptoms with intelligence instead of surrendering to blind fear.

• A civilization that navigates uncertainty with wisdom, not panic.

• A humanity no longer governed by narratives of inherent fragility.

• A global culture that honors resilience as a central virtue.

• A people who prioritize sovereignty over dependency.

• A vision where healing is reclaimed as a natural birthright rather than reduced to a commodified service.